

## PART B - FEE(S) TRANSMITTAL



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01 02	C:1501 1400.00 DA C:8001 15.00 DA				January 16	, 2006	(Date)
VL.	APPLICATION NO.	FILING DATE	FIRST NAME		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	09/687,271	10/13/2000	KENJI M		IIZUTANI	ERDP001	1202
	TITLE OF INVENTION: R	EMOTE ACCESSIBLE PRO					
	APPLN. TYPE SMALL ENTITY		ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional NO		\$1400		\$0	\$1400	02/02/2006
	EXAM	IINER	ART UNIT		CLASS-SUBCLASS	J	
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	Address form PTO/SB/12	dence address (or Change of	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							document has been filed for
	(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Seiko Epson Corporation Tokyo, Japan						
Please check the appropriate assignee category or categories (will not be printed on the patent):							roup entity Government
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☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.  XX The Director is hereby authorized by charge the required fee(s) Deposit Account Number 19-2746 (enclose an ex							
							credit any overpayment, to
	5. Change in Entity Status	(enclose an extra	copy of this form).				
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Authorized Signature Tosala Haro Date Ja						nuary 16, 2006	
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